



ILLINOIS COMMERCE COMMISSION  
SECTION 5-117 SUPPLIER DIVERSITY REPORT FOR  
NEWLY IMPACTED ENTITIES  
FORM

2018 Report

1. Name of Entity: *Tilton Energy LLC*
2. Business Address: *80 West 1st, Tilton IL, 61833*
3. Business Address in Illinois (if different):
4. Person Responsible for Preparation of Report / Title: *Bruce Brown*  
*Facility Manager*
5. Type of Entity (check as many as apply):
  - ☐ Distribution
  - ☒ Generation:
    - ☐ Nuclear
    - ☐ Hydroelectric
    - ☐ Solar
    - ☐ Wind
    - ☒ Other
  - ☐ Alternative Supplier:
    - ☐ Natural Gas
    - ☐ Electricity
  - ☐ Other - please describe:
6. Please identify the person at your entity that an Illinois minority-owned business (MBE), business owned by women (WBE), business owned by veterans (VBE), business owned by persons with disabilities (DBE) or small business (SBE) that wants to do business with your entity should contact.

*Bruce Brown*  
*217-446-7167*

7. In calendar year 2017, did your entity satisfy the applicable revenue criteria below?

☒ Yes ☐ No

- For an alternative retail, municipal or electrical cooperative electric supplier, sales or delivery of 500,000 or more kwh
- For an alternative gas supplier or natural gas cooperative, sales or delivery of 500,000 or more dekatherms
- For any other commercial energy supplier, sales or delivery of 500,000 or more kwh

8. In calendar 2017, did your entity track spending with, contracting with or procurement from MBEs, WBEs, VBEs, DBEs and/or SBEs? ☐ Yes ☒ No

- If you checked "no," describe the actions you can take to respond to the reporting requirements of Section 5-117 of the Public Utilities Act next year. (Note: 2018 reports will be due April 15, 2019)

*MANUAL TRACKING REQUIRED.*

**IF YOUR ANSWER TO EITHER QUESTION 7 OR 8 IS "NO", YOU MAY STOP HERE; OTHERWISE, PROCEED TO QUESTION 9**

9. Total calendar year 2017 spending / total value of contracts with / total procurement from minority-owned businesses (MBEs), businesses owned by women (WBEs) businesses owned by veterans (VBEs), businesses owned by persons with disabilities (DBEs) and/or small businesses (SBEs):

(a) \$ \_\_\_\_\_ .00 Percentage of total: \_\_\_\_%

(b) Illinois totals (if tracked)  
\$ \_\_\_\_\_ .00 Percentage of total: \_\_\_\_%

10. If your entity tracks spending by type of business, please complete the table below:

	Entity Totals	
Vendor Classification	Spending	Percentage of Total
MBEs		
WBEs		
VBEs		
DBEs		
SBEs		
	Illinois Totals, if tracked	
Vendor Classification	Spending	Percentage of Total
MBEs		
WBEs		